

and the Nature of the Fluoridation of Public Water Supplies Act (1963) – a review of a review

by Dr Harry Akers

INTRODUCTION

The journal of the Australian and New Zealand Society of the History of Medicine (ANZSHM), *Health and History*, has recently published a 5000-word peer-reviewed treatise, "Water Fluoridation in Queensland, Why Not? Timing, Circumstance, and the Nature of the *Fluoridation of Public Water Supplies Act (1963)*"¹. The paper involves cross-disciplinary research from a post-graduate student (Mr HF Akers) and staff members from the University of Queensland faculties of Dentistry (Dr



SAT Porter) and Political Science and International Studies (Dr R Wear) and tables hitherto unpublished archives that are relevant to the circumstances surrounding the promulgation of the *Fluoridation of Public Water Supplies Act (1963)*. The ANZSHM has a primary focus on medical history within Australia, New Zealand and the Pacific region and operates from its website at www.anzshm.org.au. A full manuscript of the original paper is currently on [eprint.uq](http://eprint.uq.edu.au) at [eprint.uq](http://eprint.uq.edu.au).

and a conjunct US-based research site known as the History Cooperative at www.historycooperative.org/. This submission to ADAQNews is a combination of material from the aforementioned journal and a lecture presented at Queensland Health's *Water Fluoridation Advocate Workshop in Brisbane* on May 29-30, 2006. As such a caveat applies. The opinions within this paper are those of HF Akers and reflect neither those of the original co-authors nor Queensland Health.

METHODOLOGY

The initial study uses traditional historical research methods involving documents from the Australian Dental Association Queensland Branch (ADAQ), Queensland State Archives and the University of Queensland Dental School. Microfilm material comes from the University of Queensland Fryer Memorial, John Oxley and Bundaberg Municipal Libraries. The results from this study were then incorporated into a lecture that was delivered at the aforesaid workshop.

BACKGROUND EXPLANATION OF THE "QUEENSLAND CULTURAL HYPOTHESIS"

For the benefit of dental colleagues, a brief explanation of the "Queensland cultural hypothesis" may be useful. Some Australian historians and social scientists argue that various characteristics, events and personalities within Queensland's political and sociological landscape are "different," if compared to their Australian equivalents. This line of argument is known as the "Queensland cultural hypothesis" and is visually

portrayed by former *Courier-Mail* cartoonist, A Moir (see Map 1) and verbally summarised by P Charlton as "a state of mind."² While such thesis is contested in some quarters, it has widespread support as evidenced by literature pertaining to some sporting events, advertising, newspaper features and political behaviour. Partisan use of the cultural hypothesis subtly appears in the Queensland debates over fluoridation, which prompted Akers, Porter and Wear to evaluate this theory as an explanation for Queensland's low fluoridation status.

Map 1

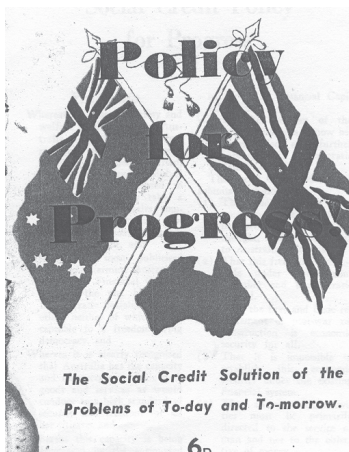


THE ABSTRACT FROM THE ANZSHM PAPER

"Unlike other Australian states and mainland territories, Queensland authorities have either ignored or virtually refused to adopt artificial water fluoridation. Even though this has continued to earn the state plaudits from antifluoridationists, there has been little analysis of the reasons for Queensland's low fluoride status. One possible explanation derives from the cultural hypothesis that "Queensland is different," an argument that reached its peak during the Bjelke-Petersen era and re-emerged more recently as a partial explanation for the support received in Queensland for Pauline Hanson's One Nation. Proponents of this argument suggest that a range of factors, including the state's decentralisation, comparatively low levels of education, and low levels of migration from non-English speaking backgrounds have contributed to a political culture

supportive of populist and authoritarian regimes.

The temptation to turn to political culture to explain Queensland's fluoride status arises because many of the state's early opponents of fluoridation inhabited the populist fringes of Queensland politics. This paper, however, argues that the reasons for Queensland's low levels of fluoridation are more complex and lie not so much in its political culture but more specifically in the nature



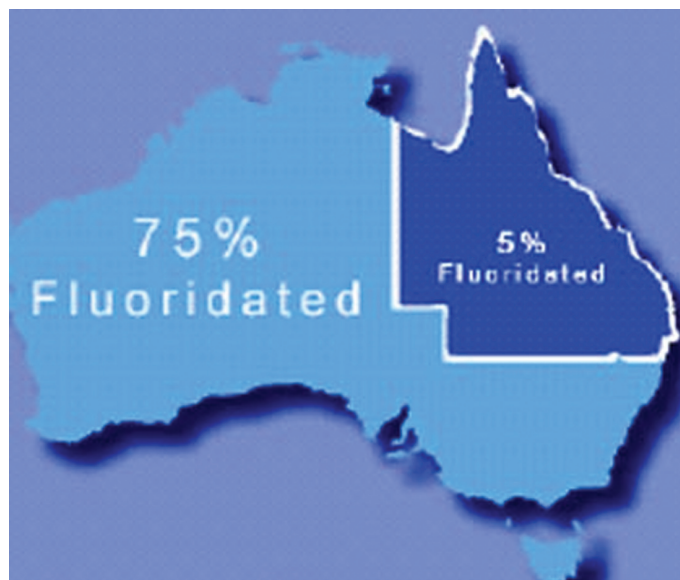
of state legislation governing fluoridation. The *Fluoridation of Public Water Supplies Act (1963)* needs to be understood in the context of the sociopolitical and legal circumstances preceding the time of promulgation. The Queensland fluoridation Act gave and continues to give tactical advantages to antifluoridationists, which means that a great deal of political will is required to achieve fluoridation. As a consequence, successive Queensland governments have refused to revisit the legislation and local authorities have taken the path of least resistance, leaving Queensland's largely unfluoridated *status quo* intact."

FURTHER COMMENT ABOUT 'QUEENSLAND DIFFERENCE'

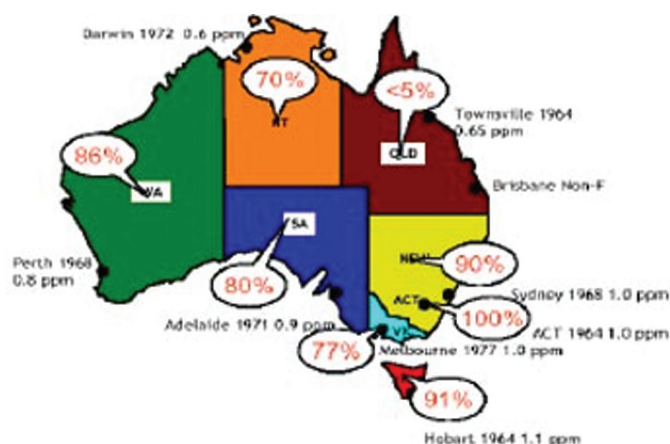
The background to this abstract is relevant. Since 1954, almost all Queensland authorities have either ignored or refused to implement artificial water fluoridation. Once again, the argument that "Queensland is different" could suggest a cultural explanation for its low fluoride status. While there are unpublished differences between Akers, Porter and Wear over the qualification, quantification and historical significance of the "Queensland cultural hypothesis," they concur on a number of distinctive Queensland characteristics within the Australian fluoride-precincts. By 1984, of the 850 Australian towns and cities that had introduced artificially fluoridated water, only seven were in Queensland. Another Queensland feature is the comparatively high incidence of de-fluoridations - Gold Coast (1979), Gatton Agricultural College (1979), Allora (1982), Killarney (1983), Proserpine - Whitsunday (1992), Gatton (2002) and Biloela (2003). Brisbane is the only non-fluoridated Australian capital city. A recent pro-fluoride brochure produced jointly by the Pharmacy Guild of Australia Queensland, the

Australian Medical Association Queensland and the ADAQ further highlights “Queensland difference” by showing a map of Australia with Queensland 5 per cent fluoridated and the rest of Australia 75 per cent, (see Map 2) ³. A more detailed representation appeared in P Forster’s recent inquiry into Queensland Health’s systems (see Map 3) ⁴. Akers (2006), in an address to a Queensland Health *Water Fluoridation Advocate Workshop*, uses Commonwealth Department of Health statistics to allude to another idiosyncrasy, the comparative and actual decline in Queensland’s fluoridation status from 10.1 percent (1979) to 5.1 percent (1984) ⁵. These statistics confirm Queensland’s perennial difference in terms of fluoride status when a comparison is made with other Australian states and mainland territories.

Map 2



Map 3



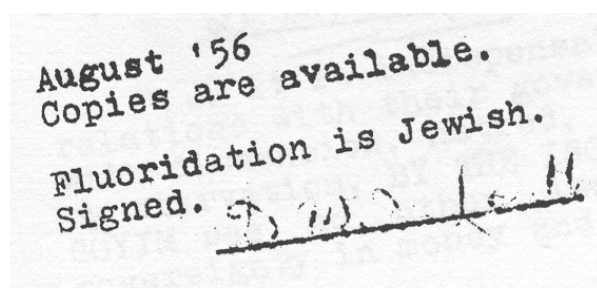
While such information is not new and while its historical and sociological significance is debateable, its linkage to “Queensland difference” has not been widely reported in the literature. Political scientist at the University of Wollongong, W Varney, indirectly alludes to the “cultural hypothesis” with her cursory reference to Queensland conservatism as one factor implicit in Queensland apathy to fluoridation ⁶. However, Akers argues that when it comes to fluoride legislation, Queensland’s Act is distinctive because it is the most liberal in Australia, and hence, according to Akers, the Act is the very antithesis to both authoritarianism and the traditional cultural explanation. Having said this, Akers, Porter and Wear establish new parameters for fluoride-related debate over “Queensland difference” by citing more meaningful features emanating from the unusual nature of the *Fluoridation of Public Water Supplies Act* (1963) and its linkage to the *Local Government Acts* (1937-1962). This

correlation is unique within Australian fluoride precincts and, in spite of recent parliamentary amendments, still exists (see Table 1). According to Akers, Wear and Porter, this legislative combination gives Queensland’s antifluoridationists tactical advantages because it institutionalises a dichotomy in fluoride responsibility by creating three realms of authority: The Minister for Local Government; the local authority; and the ratepayers. All have the power to call for a referendum. Akers extends this theme by arguing that, within Queensland, the political process has traditionally handled artificial fluoridation as a water treatment issue rather than a health issue.

Table 1

Year	State	Legislation
1953	Tasmania	Implied powers within The Public Health Act
1956	New South Wales	Implied powers within The Local Governments Acts
1957	New South Wales	The Fluoridation of Public Water Supplies Act
1963	Victoria	The Local Government Act
1963	Queensland	The Fluoridation of Public Water Supplies Act
1963	ACT	Specific legislation not necessary
1966	Western Australia	The Fluoridation of Public Water Supplies Act
1968	Tasmania	The Fluoridation Act
1971	South Australia	Specific legislation not necessary
1972	Northern Territory	Specific legislation not necessary
1973	Victoria	The Health (Fluoridation) Act

Queensland’s Act is also different in terms of limited indemnity provisions, which issue surfaced again as a concern for local authorities in the Brisbane City Council’s *Lord Mayor’s Taskforce on Fluoridation - Final Report* (1997) ⁷. While the historical opposition from high profile and articulate academics like Sir A Amies, Dr P Sutton and Prof M Diesendorf is widely acknowledged, Akers, Porter and Wear reveal the early political



arm of Queensland’s, and arguably Australia’s, antifluoridation movement, Social Credit. Although senior dental colleagues from the Capricornian region would understand the formal association between Social Crediters and the antifluoride movement, this symbiosis rarely appears in Australian historical or dental literature. This connection, involving a populist movement using conspiratorial arguments against bureaucracy, health professionals and corporate interests, adds further weight to a cultural explanation of Queensland’s low fluoride status.

GENERIC PROBLEMS WITHIN THE “CULTURAL HYPOTHESIS”

Although not enunciated in the ANZSHM paper, a cultural explanation faces potential intrinsic flaws in that objective

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Water Fluoridation in Queensland. Why Not? Timing, Circumstance, and the Nature of the Fluoridation of Public Water Supplies Act (1963) – a review of a review (continued from page 17)

indices to define and quantify “Queensland” are problematical. Moreover, if one accepts the presence of a Queensland culture, then arguably one accepts an Australian culture. This raises the possibility that Queensland’s low fluoridation status is linked to either an absent Australian or an intrinsic Queensland cultural trait. An extension of this theme is the internal (Queensland) and external (non-Queensland) perception of domestic culture, which arguably differs. In addition, culture is a comparative concept, as ably demonstrated by eminent Queensland historian, Prof R Fitzgerald: “Hopefully the rest of Australia will learn from Queensland’s example and from Europe that it (fluoridation) is not necessary. Rather, what is really needed is that we learn to challenge orthodoxy...”⁸ In contrast, an ADAQ website www.fluoridationqld.com simply asks “Why is Queensland different?” Clearly, ‘difference’ describes a comparison and any conclusion reflects the chosen indices that are compared: Queensland and Europe or Queensland and Australian states and mainland territories. Moreover, culture is fluid and heterogeneous, yet similar argument over fluoridation is nationally demonstrable, perennial and largely unchanged as evidenced by a comparison of media reports in Ballarat (2002, Vic) and in Bundaberg (1954, Qld). Finally, the analytical problems of determinism (choosing a fortuitous index to support a line of argument) and stasis (choosing a fortuitous epoch to support a line of argument) can permeate any cultural explanation and potentially lead to a biased conclusion. Hence culturally based rationalisation of sociopolitical attitude, belief or action can lend itself to rigorous challenge.

AKERS, PORTER AND WEAR AND THE ‘CULTURAL HYPOTHESIS’

Akers, Porter and Wear do not discuss these aforementioned difficulties within sociological research, because, in what may initially seem to be a self-defeating paradox, they dismiss the “cultural explanation” as an explanation for Queensland’s low fluoridation status. In a comparison of fluoride legislation from all Australian states and mainland territories, they argue the non-Queensland legislation permits centralised executive decision to fluoridate and discourages the use of referenda. In addition, most states have provided perennial

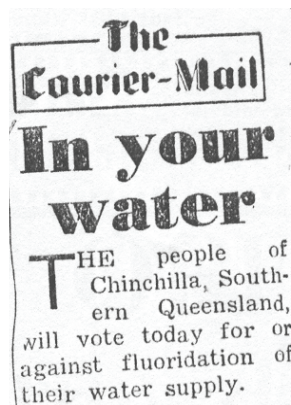


Fluoridation of Public Water Supplies Act 1963

financial incentives to fluoridate, either through the state government bearing some or all of the costs of installation or by subsidies to local authorities or water boards. They also cite Queensland’s provincial decentralisation, the lack of centralised authority over water treatment, an absence of state political will and the comparatively diversified water-treatment infrastructure as other contributing factors. Hence, Akers, Porter and Wear argue that legislative, fiscal, indemnity and political considerations underwrite Queensland’s low fluoride status. This revelation may not be new to ADAQ, but it is the first time that it has been methodically chronicled and formally enunciated within the public domain, and as such, the ANZSHM paper is a new and arguably pivotal contribution to fluoride debates within Queensland.

THE TIMING, CIRCUMSTANCE AND NATURE OF THE FLUORIDATION OF PUBLIC WATER SUPPLIES ACT (1963)

For those who have a penchant for history, Akers, Wear and Porter table many hitherto difficult-to-access archives relating to the promulgation of the *Fluoridation of Public Water Supplies Act (1963)*. These involve: the 1960 Chinchilla referendum; the 1960-1964 events at Biloela; letters involving the Director of Local Government, the Parliamentary Draftsman and the Solicitor-General; and Cabinet documents. Akers, Wear and Porter also highlight many relevant events: litigation at Sale in Victoria; an article in the *British Medical Journal*; an unresolved



Privy Council case involving the *Municipal Corporations Act (1954)* (NZ); the 1963 federal election; a threatened injunction at Biloela; the defeat of the *Fluoridation of the Public Water Supplies Bill (1963)* in Western Australia; fluoride-related controversy in the Australian Capital Territory; and confrontation in New South Wales between the Minister for Health, Hon W Sheahan and the Sydney Metropolitan Water Board. This evidence leads Akers, Porter and Wear to comment: “It appears

that the Queensland government decided to legislate on water fluoridation because of concerns regarding issues of legality, litigation and compulsion, rather than dental health.” Hence, they reject the culture phenemon by arguing that the timing and circumstances of promulgation influenced the nature of the *Fluoridation of Public Water Supplies Act (1963)*. Moreover their archival evidence confirms that legislative, fiscal, political and indemnity considerations are congruent and synergistic criteria that have created and will sustain Queensland’s low fluoridation status.

CONCLUSION

At Queensland Health’s *Water Fluoridation Advocate Workshop*, Akers summarised Queensland’s fluoride-milieu: “I believe the timing and circumstance of promulgation influenced the nature of the *Fluoridation of Public Water Supplies Act (1963)*. This Act was given royal assent at a time when there was a pending Privy Council decision on the legality of water fluoridation within the British Commonwealth. The Act was, and still is, the product of political expedience and paralyses fluoridation in a domain between local authority and state government, where it provides fortuitous tactical advantages to antifluoridationists. For a fluoride advocate, the Act is a problem. It needs to be revoked and redrafted.”

REFERENCES

1. HF Akers, SAT Porter and R Wear, “Water Fluoridation in Queensland, Why Not? Timing, Circumstance, and the Nature of the Fluoridation of Public Water Supplies Act (1963)”, *Health and History*, vol. 7, no. 2, 2005, pp. 30-55.
2. This diagram is a modified version of that from A. Moir. See P Charlton and A Moir. *State of Mind: Why Is Queensland Different*. North Ryde, Methuen Haynes, 1983, p. 1.
3. I Tall, K Sclavos and D Anning, *Healthy Teeth or Decay? Water Fluoridation: The Facts*. Brisbane, Australian Medical Association (Queensland Branch); Pharmacy Guild of Australia (Queensland Branch); Australian Dental Association (Queensland Branch), 2003.
4. P Forster, *Queensland Health Systems Review*. The Consultancy Bureau, Brisbane, 2005, p. 53. Forster acknowledges this diagram as that of AJ Spencer.
5. HF Akers, *Address: The Social and Political History of Water Fluoridation in Queensland 1920-2005*. Queensland Health Water Fluoridation Advocate Workshop, Brisbane, May 29-30 2006.
6. W Varney. *Fluoride in Australia a Case to Answer*. Sydney, Hale and Ironmonger, 1986, pp. 19-20.
7. Brisbane City Council, *Lord Mayor’s Taskforce on Fluoridation - Final Report*. Brisbane, Brisbane City Council, 1997.
8. R Fitzgerald, “Trading Tooth Decay for Cancer”, *Australian*, 26 May 2005, p. 11.